PTO/SB/17 (10-07)

Under the Panenuntk Perfuction	n Act of 199	5 no person are requi	ired to n	U.S. Patent	and Trademark	k Office; U.S. DEP	ARTMENT OF	COMMERCE	
Under the Paperwork Reduction Act of 1995, no person are required to				Complete if Known					
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL For FY 2008				Application Number 10		0/662,906-Conf. #1268			
				Filing Date Se		eptember 15, 2003			
				First Named Inventor Ro		ong-Hwa Lin			
				Examiner Name P.		Gambel			
Applicant claims small entity status. See 37 CFR 1.27			Γ	Art Unit 1644					
TOTAL AMOUNT OF PAYMENT (\$) 1,050.00				Attorney Docket I	No. A	0871.70001U	871.70001US00		
METHOD OF PAYMENT	check all	that apply)							
Check X Credit Car	ı 🔲	Money Order	Non	e Other (;	lease identify):	:			
Deposit Account Deposit	Account Num	ber: 23/28	25	Deposit A	ccount Name:_	Wolf, Green	field & Sack	s, P.C.	
For the above-identifie	d deposit	account, the Dire	ctor is	hereby authorize	d to: (check	all that apply)			
Charge fee(s) in	dicated be	elow		Charge	fee(s) indic	ated below, ex	cept for the	filing fee	
Charge any add fee(s) under 37		(s) or underpayme and 1.17	ents of	x Credit	any overpay	ments			
FEE CALCULATION									
1. BASIC FILING, SEARCH,									
	FILIN	IG FEES Small Entity	SEA	RCH FEES Small Entity	EXAMINA	Small Entity			
Application Type	Fee (\$)		ee (\$		Fee (\$)	Fee (\$)	Fees Pa	id (\$)	
Utility	310	155	510	255	210	105			
Design	210	105	100	50	130	65			
Plant	210	105	310	155	160	80			
Reissue	310	155	510	255	620	310			
Provisional	210	105	0	0	0	0			
2. EXCESS CLAIM FEES								mall Entity	
Fee Description							Fee (\$)	Fee (\$)	
Each claim over 20 (includin Each independent claim over							50 210	25 105	
Multiple dependent claims	3 (menuai	ng Keissues)					370	185	
Total Claims Extra Cl	aime	Fee (\$)	Fee F	aid (\$)	Mol	tiple Depende		103	
3 -39= 0 x 0 =			O Fee			ee Paid (\$)			
HP = highest number of total claims paid for, if greater than 20.				0			0		
Indop. Claims Extra Claims Fee (\$) Fee Pald (\$)									
1 -3= 0	x]	0 =		0					
HP = highest number of independe	nt claims pai	id for, if greater than 3	š.						
3. APPLICATION SIZE FEE						4			
If the specification and draw listings under 37 CFR 1.	ings exce	ed 100 sneets of	paper fee du	excluding electr	onically file or small ent	od sequence or tity) for each a	ditional 50		
sheets or fraction thereof					or sman en	, ,,	authorna Do		
Total Sheets Ext	a Sheats			dditional 50 or frac			Fee P	aid (\$)	
- 100 =		/50 ==		(round up to a who	le number) x				
4. OTHER FEE(S)							Fees F	aid (\$)	
Non-English Specification		•		,					
Other (e.g., late filing sur	:harge): _1	253 Extension	for res	sponse within th	ird month		1,05	0.00	
SUBMITTED BY						,			
Signature (V)	WVO O'			Registration No. 45,128 (Attorney/Agent)		Telephone	617.646.8000		
Name (Print/Type) Alan W. Steele, M.D., Ph.D.						Date	March 5, 2009		
		Contillents - 2 F	la atua	ic Filing Under 37	CED 4 9				
I hereby certify that this paper (a	long with a	ny paper referred to	as beir	ng attached or enclo	sed) is being	transmitted via t	ne Office elect	ronic filing	
system in accordance with § 1.6	(a)(4).	4.	.n	Januarjes-C	20.				
Dated: March 5, 2009		Signatura: 12	res 6	sunnanged-70	011.0 1	lanet D'Annunzio	Eille		